



**The Federal Women's Council, Hawaii  
a subcommittee of the**

**Honolulu-Pacific Federal Executive Board  
EEO Council**

***Presents***

## ***ARE YOU READY?***

**CAREER ENHANCEMENT SEMINAR**

***A one-day seminar that will re-energize you.  
Plan to be challenged, motivated and inspired.***

**HALE KOA HOTEL  
2055 Kalia Road  
Honolulu, HI 96815**

**DERUSSY HALL  
7:30 a.m. – 3:00 p.m.  
JULY 30, 2003**

**Cost: \$85 by July 18, 2003**

The Federal Women's Council of Hawaii comprises representatives from various Federal agencies in the State of Hawaii. The organization is dedicated to promoting equal employment opportunity through the education of its members and the workforce they represent. This seminar is an annual event and is open to all Federal, State, City and County government and private sector employees regardless of gender. For further information about the seminar or the goals and objective of the Council, please visit the FWCH web page at <http://www.honolulu-pacific.feb.gov/fwch/fwch.htm>.

**AGENDA**  
**FEDERAL WOMEN'S COUNCIL-HAWAII,**  
**CAREER ENHANCEMENT SEMINAR**  
**ARE YOU READY?**

**7:00 a.m.      REGISTRATION & REFRESHMENTS**

**7:25 a.m.      WELCOME**

**7:30 a.m.      UNDERSTANDING YOURSELF & YOUR STRENGTHS**

**Mr. Mike McCrary**

Take the first step on the road to self-discovery. The *Personal Profile Preview*, a unique, user-friendly 10-question assessment that will lead you to a better understanding of yourself and your behavior. This understanding will increase your effectiveness in a range of people situations and provide insights into the behavior of others. This is a fun and informative tool that offers you "strategies for success."

**9:30 a.m.      BREAK**

**9:45 a.m.      THRIVING IN A CHANGE CRAZY WORLD - Mr. Eric Smith**

Understand the nature of change and how to navigate successfully through it rather than battered by it. Discover for yourself how to deal with change through this fun and lighthearted look at change so that you can enjoy more success and less stress in your work and in your life.

**11:00 a.m.      LUNCHEON/PERFORMANCE/EXHIBIT TABLES**

A prize-winning, exciting Hawaii History Day performance by Lilika Fonua, Jackie Lautaha, and Noelle Spring (Kahuku High School students) on Mary Wollstonecraft: An Enlightened View of Women's Rights and Responsibilities.

**1:00 p.m.      LIVE UP TO YOUR POTENTIAL - Ms. Beth Terry**

Many of us have forgotten our dreams or talked ourselves out of them. We have rationalized ourselves into a corner. We give up because (1) we say "goals don't work"; (2) we felt selfish wanting so much for ourselves; or (3) it was easier to have an excuse than do what it took to reach the dream. Beth provides simple questions and exercises designed to rediscover our dreams and start on our journey, no matter our age or current circumstances.

**2:00 p.m.      TODAY IS "SOMEDAY" - GET GOING!! - Ms. Beth Terry**

We all struggle to create balance between our dreams for our future and our need to handle day-to-day life. In that struggle, our dreams often get lost and before we know it, we are looking back on a life that has not lived up to our expectations. This talk walks us through seven steps to get going and get on with our lives.

# REGISTRATION INSTRUCTIONS AND FORM

## FEDERAL WOMEN'S COUNCIL-HAWAII CAREER ENHANCEMENT SEMINAR

### ***ARE YOU READY?***

**Wednesday, JULY 30, 2003 at the HALE KOA HOTEL, 7:00 a.m. – 3:00 p.m.**

**FEDERAL ORGANIZATIONS:** Advance payment is required. Payment may be made using a DD 1556 or equivalent, credit card, or personal check. **Federal employees submitting a DD 1556 or equivalent are not registered until we receive your credit card information or government check. Make checks payable to "FWCH."** Checks supporting 1556 forms **must include registrant's name, agency code/location, and document number.**

**STATE, LOCAL GOVERNMENT AND PRIVATE SECTOR ORGANIZATIONS:** Nominations may be made by letter and must accompany this registration form.

**REGISTRATION FEE:** The fee of **\$85.00** includes speakers' fees and all charges for use of the hotel facilities, including morning refreshments and lunch. A vegetarian meal is available for those with special dietary needs.

**REGISTRATION CONFIRMATION:** Please check with the point of contact (POC) designated to process your training request. We will be e-mailing or faxing confirmation of enrollment to the respective POC.

**PARKING:** is available at the Hale Koa parking garage. Be sure to take your Hale Koa parking ticket to the seminar for "event parking" validation. The charge for "event parking" is \$2.00 for eight hours. Parking for longer than eight hours will result in extra costs to you.

Mail registration form, copy of training form or letter of nomination and check payment to:

Attn: Saadia R. Wiley  
Asia-Pacific Center for Security Studies  
2058 Maluhia Road  
Honolulu, HI 96815-1949

\*\*\*\*\***MAKE CHECKS PAYABLE TO "FWCH."**\*\*\*\*\*

Registration forms may also be faxed 808-971-8999 or e-mailed: [wileys@apcss.org](mailto:wileys@apcss.org)

**CANCELLATIONS:** Cancellation notices must be mailed to the registrar and postmarked by July 18, 2003 in order to be eligible for a refund. No requests for a refund will be accepted after July 18, 2003. Refunds will be processed after seminar. Substitutes are allowed in lieu of cancellation.

#### **PRIVACY ACT STATEMENT**

Section 6311 of Title 5 to the U.S. Code authorizes collection of this information. The primary use of this information is to record accurate payment information.

## ARE YOU READY?

Wednesday, July 30, 2003 ♦ Hale Koa Hotel

PLEASE TYPE OR PRINT CLEARLY

LAST NAME	FIRST NAME	Grade/Rank	Signature of Registrant
JOB TITLE			
DEPARTMENT/AGENCY/ORGANIZATION			
MAILING ADDRESS			
CITY	STATE	ZIP CODE	
EMAIL ADDRESS			
PHONE (BUSINESS)		FAX NO.	
CELL PHONE		PAGER	
NAME (FOR NAME BADGE)			

### PAYMENTS METHODS: CHECK ONE

\_\_\_ MY CHECK FOR \_\_\_\_\_ PAYABLE TO FWCH IS ENCLOSED

\_\_\_ 1556/Equivalent

\_\_\_ CREDIT CARD [Circle one: MasterCard VISA (personal or government)]

Name on Credit Card: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Card number: \_\_\_\_\_

Exp date: \_\_\_\_\_

Cardholder signature: \_\_\_\_\_

Fax #: \_\_\_\_\_

### SPECIAL NEEDS

\_\_\_ Vegetarian meal requested

\_\_\_ If you have a special need (as defined by the Rehabilitation Act of 1973), check here and an FWCH member will call you to discuss your requirements.

For official use only

Amount rec'd \_\_\_\_\_

Date \_\_\_\_\_

Registration # \_\_\_\_\_

By \_\_\_\_\_

Confirmation sent out \_\_\_\_\_